BEST AVAILABLE COPY

ı	DIC. 8, 1004								. 44	· · · · ·	SOCKEL MO	inoet.	
PATENT APPLICATION FEE DETERMINATION RECO Effective October 1 52804									101	4	133	86	
	CLAIMS AS FILED - PART I								ENTITY		OTHE	RTHAN	
			Colun	(Column 1) (Column 2)			٦.	TYPE		OF	SMALL	ENTITY	
TOTAL CLAIMS								RATE	FEE	4	RATE	FEE	
FOR			NUMBE	NUMBER FILED		NUMBER EXTRA		BASIC FO	£ 395.00	OR	BASIC FE	790.00	
I	TOTAL CHARGEABLE, CLAIMS			minus 20=				x 25		OR	x-50		
INDEPENDENT CLAIMS			ninus 3 =					x100		OR	× 200		
М	ULTIPLE DEPE	NDENT CLAIM	PRĖSENT	RESENT						٦.			
	f the difference	e in column 1 is	less than a	ess than zero, enter "0" in column 2				+/80 TOTAL	╁╌╌	OR	1700	-	
l	CLAIMS AS AMENDED - PART II									Jon	OTHER	THAN	
j	2.1.05 (Column 1) (Column 2) (Column 3)								ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		PREVIO	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		PATE	ADDI TIONAL FEE	
Ş	Total	. 9	Minus		20	= /		x 25		OR	×50.		
AME	Independent	· /	Minus		3	-/		×100		OR	x200		
	FIRST PRES	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							1	OR	+360		
•								+ 180 TOTAL		OR	14101	/	
	ADOIT. FI AColumn 1) (Column 2) (Column 3)										ADD:T. FEE		
818	3/14/05	CLAIMS REMAINING AFTER		HIGHE NUMB PREVIOU PHILD	er Usly	PRESENT EXTRA		RATE,	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NO	Total	· 9	Minus	20)			x 25		S:	x50		
Ar	independal	·	Minus	<u>3</u>		-	; :-	× 100		OR	1200		
Ľ	FIRST PRESE	NTATION OF ML	JLTIPLE CEI	PENDENT	CLAIM		1 5			OR	+260		
						-	L	+/80 /			TOTAL		
							Af	OOIT, FEE		OR ,	ADDIT. FEE		
	·	CLASS		i righe	<u>51</u> i	# 1 <u> </u>				:		£	
ENT C		REMAINING AFTER : AMENDMENT		PREVIOU PAID FO	F ISLY	PREȘENT EXTRA		RATE	ADUI- TIONAL FEE		RATE	TIONAL FEE	
AMENDMENT	Total	•	Minus	**		<u>.</u> :		×25		OR	x 50		
WE	Independent	•	Minus	••••	\cdot	<u>.</u>		× 100		OR	x200		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						-			. 1	1210		
• •	* If the entry in column 1 is less than the entry in column 2, write '0' in column 3.							+ 180 101AL		OR	1014	!	
"If the Highest Number Previously Faid For IN THIS SPACE is less than 20, enter 20." ADDIT, FEE ADDIT, FEE													
	The "Highest Number Previously Paid For" (Total or Independent) is the highest north er found in the appropriate box in column 1												
FORM	ORMPTO-72 MANAGOT PRINT MATERIAL CHISELUS DEPARTUENT OF CONTERCE												